1.	1,5,12	Application of Docket Number								
/	PATENT APPL	RD .	00	1/2	/ ₁ /_	-				
Effective December 29, 1999 ()9/005 /77										
	CLA		LL ENTITY	,	OTHER	THAN				
F	OR	NUMBER F	mn 1) FILED		(Column 2) NUMBER EXTRA		E	¬OR		ENTITY
BASIC FEE						RAT	433.94	\exists	RATE	FEE
-	OTAL CLAIMS	// minus 20= *					345.0	OR		690.00
-		1/2	,/	 		X\$ 9)=	OR	X\$18=	
<u> </u>	DEPENDENT CLAIMS	/minus 3 = *			X39	=	OR	X78=	78	
M	MULTIPLE DEPENDENT CLAIM PRESENT)=	OR	+260=	
 * If	* If the difference in column 1 is less than zero, enter "0" in column 2						AL	OR	TOTAL	768
	CLAIM				OTHER	THAN				
_	(Column 1) (Column 2) (Column 3)					SMA	LL ENTITY	OR	SMALL	
∀	REN	MAINING FTER		HIGHEST NUMBER PREVIOUSLY	PRESENT	RAT	ADDI E TIONA		RATE	ADDI- TIONAL
AMENDMENT	Section 1	NDMENT		PAID FOR	EXTRA		FEE		TIATE	FEE
<u>S</u>	Total +	/ O Mir		20	=	X\$ 9	=	OR	X\$18=	
AME	Independent *	<u> </u>	nus +	" Af	= 3	X39:	=	OR	k/8=	252.00
	FIRST PRESENTATION	JN OF MULTI	IPLE DEPEN	DENT CLAIM		+130	=	OR	+260=	7
						TO			TOTAL ADDIT. FEE	352.0
		lumn 1)	(1	Column 2)	(Column 3)	ADDIT. F	CE		AUUII. FEE	para
8		LAIMS MAINING		HIGHEST NUMBER	PRESENT		ADDI-	7		ADDI-
MENT										
12	AME!	FTER NDMENT	P	PREVIOUSLY PAID FOR	EXTRA	RATE		-	RATE	TIONAL FEE
NOW	AME!	FTER		PREVIOUSLY PAID FOR	EXTRA = 2	RATE X\$ 9	TIONAL	-	RATE X\$18=	
AMENDME	Total * 1.	FTER MOMENT 2 Min	nus **	PREVIOUSLY PAID FOR			TIONAL	OR	X\$18=	FEE
AMENDME	Total +	FTER MOMENT 2 Min	nus **	PREVIOUSLY PAID FOR	= 2	X\$ 9:	TIONAL FEE	OR OR	X\$18=	
AMENDME	Total * 1.	FTER MOMENT 2 Min	nus **	PREVIOUSLY PAID FOR	= 2	X\$ 9 X39= +130	TIONAL FEE	OR OR OR	X\$18= X78- +260=	FEE 48-00
AMENDME	Total * Independent * C	TER NDMENT Min Min ON OF MULTI	nus **	PREVIOUSLY PAID FOR	= 2	X\$ 9:	TIONAL FEE	OR OR OR	X\$18= X78= +260= TOTAL ADDIT FEE	FEE 68. 00
AMEND	Independent • C	FTER MOMENT 2 Min	nus ** PLE DEPEN	PREVIOUSLY PAID FOR	= 2	X\$ 9= X39= +130=	TIONAL FEET	OR OR OR	X\$18= X78= +260= TOTAL ADDIT FEE	FEE 168.00 168.00 Paid
CAMEND	Total	Min ON OF MULTI Jaims Jaining FTER	nus ** PLE DEPEN	DENT CLAIM	= 2 = 2 (Column 3) PRESENT	X\$ 9= X39= +130=	TIONAL FEET	OR OR OR OR	X\$18= X78= +260= TOTAL ADDIT. FEEL	FEE 168.00 168.00 Paid ADDI-
CAMEND	Total Independent FIRST PRESENTATIO (Coll REM AF AMEN	TER NDMENT Min ON OF MULTI LAIMS IAINING FTER NDMENT	nus ** PLE DEPEN	DENT CLAIM Column 2) HIGHEST NUMBER	= 2 (Column 3) PRESENT EXTRA	X\$ 9: X39= +130: TOT ADDIT. F	TIONAL FEET	OR OR OR OR	X\$18= X78= +260= TOTAL ADDIT FEE	FEE 168.00 168.00 Paid
CAMEND	Total Independent FIRST PRESENTATION (Colimon of the color of the c	Min TER NDMENT Min ON OF MULTI Umn 1) AIMS IAINING FTER NDMENT Min	nus ** PLE DEPEN	DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	X\$ 9: X39= +130: TOT ADDIT. F	TIONAL FEE	OR OR OR OR	X\$18= X78= +260= TOTAL ADDIT. FEEL	FEE 168.00 Paid ADDITIONAL
AMEND	Total Independent FIRST PRESENTATION (Colination of the colon of th	Min Min	nus ** PLE DEPEN (((DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	= 2 (Column 3) PRESENT EXTRA	X\$ 9 X39= +130: TOT ADDIT. F	TIONAL FEE	OR OR OR	X\$18= +260= TOTAL ADDIT. FEE	FEE 168.00 Paid ADDITIONAL
CAMEND	Total Independent FIRST PRESENTATION (Colimon of the color of the c	Min Min	nus ** PLE DEPEN (((DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	X\$ 9: X39= +130: TOT ADDIT. F	TIONAL FEE	OR OR OR OR	X\$18= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	FEE 168.00 Paid ADDITIONAL
- AMENDMENT C AMEND	Total Independent FIRST PRESENTATION (Column 1 is left) Total Independent FIRST PRESENTATION Total Independent	Min	nus ** PLE DEPEN ** PLE DEPEN ** pus ** pus ** pus try in column 2	DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA =	X\$ 9: X39= +130: TOTADDIT. F RATE X\$ 9= X39= +130= TOTA	AL ADDITIONAL FEE	OR OR OR OR	X\$18= +260= TOTAL ADDIT. FEE X\$18= X78= +260= TOTAL	FEE 168.00 Paid ADDITIONAL
AMENDMENT C AMEND	Total Independent FIRST PRESENTATION (Colination of the entry in column 1 is left the "Highest Number Profit the "Highest Number N	Min ON OF MULTI AIMS IAINING FTER NDMENT Min ON OF MULTI Win ON OF MULT WIN ON OF MULT	nus ** PLE DEPEN (((Plus ** PLE DEPEN ttry in column 2 or IN THIS SP, or IN THIS SP, or IN THIS SP	COlumn 2) HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM C, write "0" in colu ACE is less than ACE is less than ACE is less than	(Column 3) PRESENT EXTRA =	X\$ 9= +130= TOT ADDIT. F X\$ 9= X39= +130= TOT ADDIT. FE	AL ADDITIONAL FEE	OR OR OR OR OR OR	X\$18= +260= TOTAL ADDIT. FEE X\$18= X78= +260= TOTAL ADDIT. FEE	FEE 168.00 Paid ADDITIONAL
SET SAMENDMENT C AMEND	Total Independent FIRST PRESENTATION (Colination of the entry in column 1 is left the "Highest Number Presentation of the "Highest Numbe	Min ON OF MULTI AIMS IAINING FTER NDMENT Min ON OF MULTI Win ON OF MULT WIN ON OF MULT	nus ** PLE DEPEN (((Plus ** PLE DEPEN ttry in column 2 or IN THIS SP, or IN THIS SP, or IN THIS SP	COlumn 2) HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM C, write "0" in colu ACE is less than ACE is less than ACE is less than	(Column 3) PRESENT EXTRA =	X\$ 9= +130= TOT ADDIT. F X\$ 9= X39= +130= TOT ADDIT. FE	AL ADDITIONAL FEE	OR OR OR OR OR OR	X\$18= +260= TOTAL ADDIT. FEE X\$18= X78= +260= TOTAL ADDIT. FEE	FEE 168.00 Paid ADDITIONAL